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PTO/SB/05

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	<i>Attorney Docket No.</i>	99RSS163
	<i>First Named Inventor or Application identifier</i>	Magnus H. Berggren
ADDRESS TO: Assistant Commissioner of Patents Box Patent Application Washington, DC 20231	<i>Title</i>	Soft Trellis Slicer For Improving The Performance Of A Decision-Directed Phase Tracker
	<i>Express Mail No.</i>	EL339109815US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

1. ☒ Fee Transmittal Form PTO/SB/17 (submit in duplicate)
2. ☒ Specification [Total Pages: 24]
3. ☒ Drawing(s) (35 USC 113) [Total Sheets: 6]
4. ☒ Oath or Declaration [Total Pages: 6]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with No. 17 completed)
[Note No. 5 below]
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application, see
37 CFR 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation By Reference (useable if No. 4b is
checked)
The entire disclosure of the prior application, from which a copy of
the oath or declaration is supplied under No. 4b, is considered as
being part of the disclosure of the accompanying application and is
hereby incorporated by reference therein.
6. ☐ Microfiche Computer Program (Appendix)
7. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement verifying identity of above
copies

ACCOMPANYING APPLICATION PARTS

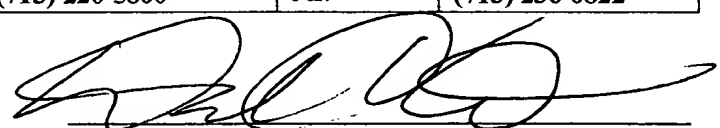
8. ☒ Assignment Papers (cover sheet & document(s))
9. ☐ Power of Attorney
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure
Statement (IDS)/PTO-1449
____ Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (Itemized)
14. ☐ Small Entity Statement(s)
Statement filed in prior application. Status still
proper and desired
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Other: _____

17. If a CONTINUING APPLICATION, check appropriate blank and supply the requisite information:

- | | | |
|---|--|---------------------------------|
| <input type="checkbox"/> Continuation | | of prior application No.: _____ |
| <input type="checkbox"/> Divisional | | |
| <input type="checkbox"/> Continuation-in-part (CIP) | | |

18. Correspondence Address					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label _____ or _____ Correspondence address below 01200 (Insert Customer No. or Attach bar code label here)					
Name	Attn: David R. Clonts AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.				
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Date: 9/22/00


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